PTO/58/05 (12-04) Approved for use through 7/31/2006. QMB 0651-0032

sient and Tradement Office; U.S. DEPARTMENT OF COMMERCE depend to a collection of information unless & displays a valid OMB control must APPLICATION FEE DETERMINATION RECORD

1	APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		/ !
500		1					SMALI	CENTITY	OA T	SMALL ENTITY		<u> </u>		
BASIC FEE				EO (NUMBER EXTRA			RATEO	FEE (S)	_	RATE (S)	FEE	(\$)	
OF OFR 1.16(a), (b), or (c))					N/A			NA .	150.00		NA	300.		
(37 CFR 1 16(1), (4. or (ril)					N/A,			NA	\$250	7	,N/A	\$500		
EXAMINATION FEE (37 CFR 1.16(q, (d), or full] ,	1 N/A		1	NA	\$100	1	NUA	\$200	<u> </u>	
TOTAL CLAIMS (37 OFR).16(1))			minus 20 =		20 =			1	X\$ 25 .	1	1	Veca	\$2UŲ	•
11	OEPENDENT C 17 OFR 1.16(h))	2	2 minus 3 =						 	OR	<u> </u>	<u> </u>		
If the specification and drawing					MS ev	ceed 100	-	X100			X200	•	• •	
APPLICATION SIZE			sheels of paper, the application size fee due					1		1	ľ			•
FEE (37 CFR 1,16(4))			is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See					· ·	Ì				·	· .
Ŀ		: }	35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					1] ·		` . ·		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1))								1	+180=	 	1			
								j			1	+360=		· : ·]
7.81	the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		J	TOTAL		
. r	7 - PAPE	PUCAT	10N AS	AMEN	DED - PAR	TH			•	•	•	•		-
•		5 ica	umn 1]		(Column	21. /	C-11				OR	ОТНЕ	R THAN	
٠.		7 0	LAIMS	γ—	HIGHES	- 	(Cohnino 3)	SMALL	ENTITY	, UR 1	· ŞMALI	LENTITY		
¥ E		A	MAINING FITER NOMENT		NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA		RATE (S)	ADDI- TIONAL		RATE (S)	ADO	۱۷ ا
MENDMENT	Un cest thresh	1 8		Minus	120)		-	X\$ 25	FEE (s)		X\$50	FEE	5)
2	Independent CIT CFR LIGAT	13		Minus	- Ce,	=		1	X100		OR		-	
3	Application Sig	7 CFR 1.1	6(s)) ·	7	/ <u> </u>		-	E .		OR	X200			
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)								+180=				 	
<u> </u>	·				(5	· Con i.	A L. IOWI			· · · · · · · · · · · · · · · · · · ·	OR	+360=		
									TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
. ,	· ·		mn 1)	·	(Column	2) (C	Column 3)			•		• • •		\neg
æ	:		AIMS I		. HIGHEST . NUMBER	Pi	RESENT	ſ		•	1		1	
		· AF	TER		PREVIOUSE		EXTRA		RATE(\$)	ADOI- TIONAL		RATE (\$)	- IODA	
ENT	Total	AMEN	OMENT.	Minus	PAID FOR		·			FEE (1)	. [TIONAL FEE (\$	
哥	(DT.CFR L14(I))				·	1.			X\$ 25 _	· .]	OR	X\$50 =		
AMEND	DICHE FIGURE		(Minus	•••	=			X100			X200-	 	
Şŀ	Application Size Fee (37 CFR 1.16(s))										OR'	, , , , , , , , , , , , , , , , , , ,		
FIRST PRESENTATION OF MULTUPLE DEPENDENT CLAIM (37 CFR 1,160)							6 <u>(i)</u>		+180=		OR	+360=		1
								· <u>-</u>	OTAL		.on L			
	If the entry in co	luma 1 is	i less than	the entry	in column 2 ·	mia m	la caluma a		OD'L FEE		OR .	ADO'L FEE	# · · · · ·	

"If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

If the Highest Humber Proviously Paid For IN THIS SPACE is less than 3, onler 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. a collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, juding gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent I-Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS, SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.